

PAGE	1	OF	2
FOR SE OF FORM 24/48			

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00053553 </div>
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ➤ <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: flex; justify-content: flex-end; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">M M</div> <div style="margin: 0 5px;">/</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">D D</div> <div style="margin: 0 5px;">/</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y</div> </div>	

Full Name of Payee Pacemaker Press PP&S, Inc.		Date of Public Distribution/Dissemination <div> <div>M M M / D D / Y Y Y Y</div> <div>04 / 21 / 2014</div> </div>	
Mailing Address 6797 Bowman's Crossing		Amount <div> <div></div> <div>3327.45</div> </div>	
City Frederick	State MD	Zip Code 21703	Transaction ID : 59400561 Date of Disbursement or Obligation <div> <div>M M / D D / Y Y Y Y</div> <div></div> </div>
Purpose of Expenditure Print 4 Color Postcard	Category/ Type	004	
Name of Federal Candidate NC Rep. Thom Tillis	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate	District: <u>98</u> State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought	<div> <div></div> <div>0.00</div> </div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Federal Capitol Communications Corporation		Date of Public Distribution/Dissemination <div> <div>MM / DD / YYYY</div> <div>04 / 21 / 2014</div> </div>	
Mailing Address 950 F Street, NW, #525		Amount <div> <div>Amount</div> <div>1000.00</div> </div>	
City Washington	State DC	Zip Code 20004	Transaction ID : 59400563 Date of Disbursement or Obligation <div> <div>MM / DD / YYYY</div> <div></div> </div>
Purpose of Expenditure Graphic Art Design		Category/ Type 004	
Name of Federal Candidate NC Rep. Thom Tillis		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>98</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought		<div> <div>Amount</div> <div>0.00</div> </div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....		4327.45
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures.....		

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Date _____

Signature